000/410885

FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL				
OMB Number:	3235-0076			
Expires:	1			
Estimated average burden				
hours per respons	se 16.00			

SEC USE ONLY					
Prefix	Serial				
DATE RE	CEIVED				
	1				

Name of Offering (check if this is an amendment for aggregate offering of up to \$48,421,982	and name has changed, and indicate change.) Offering	of Class A Units
Filing Under (Check box(es) that apply): Rule 50	04 Rule 505 Rule 506 Section 4(6)	ULOE Section
Type of Filing: New Filing Amendment		NOV 0 000
	A. BASIC IDENTIFICATION DATA	
I. Enter the information requested about the issuer		
Name of Issuer (check if this is an amendment and	name has changed, and indicate change.)	Washington, DC
Prince Sports Management Holdings, LLC		101
Address of Executive Offices	(Number and Street, City, State, Zip Code) To	elephone Number (Including Area Code)
One Advantage Drive, Bordentown, NJ 08505		9-291-5800
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, Cipy Street, Code) - 1	[elephone Number (Including Area Code)
Brief Description of Business	DEC 1 0 2008	
Holding company	020 2 0 2000	1 / 6 / 7 / 6 / 7 / 7 / 7 / 7 / 7 / 7 / 7
T C. D	THOMSON REITE	RS 00067440
Type of Business Organization corporation limited pa	artnership, already formed other (please	NO 08067142 specify,
· - · - · · · · · ·	stnarchin, to be formed	ited Liability Company
Actual or Estimated Date of Incorporation or Organizati Jurisdiction of Incorporation or Organization: (Enter tw		
		E
GENERAL INSTRUCTIONS		
Federal: Who Must File: All issuers making an offering of securitie 77d(6).	es in reliance on an exemption under Regulation D or Sec	tion 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 d and Exchange Commission (SEC) on the earlier of the dawhich it is due, on the date it was mailed by United State	ate it is received by the SEC at the address given below of	
Where To File: U.S. Securities and Exchange Commiss	ion, 450 Fifth Street, N.W., Washington, D.C. 20549.	
Copies Required: Five (5) copies of this notice must be photocopies of the manually signed copy or bear typed of		ed. Any copies not manually signed must be
Information Required: A new filing must contain all int thereto, the information requested in Part C, and any mate not be filed with the SEC.		
Filing Fee: There is no federal filing fee.		
State: This notice shall be used to indicate reliance on the Un ULOE and that have adopted this form. Issuers relyin are to be, or have been made. If a state requires the pa accompany this form. This notice shall be filed in the this notice and must be completed.	g on ULOE must file a separate notice with the Securi ayment of a fee as a precondition to the claim for the	ties Administrator in each state where sales exemption, a fee in the proper amount shall
	ATTENTION —	
Failure to file notice in the appropriate state appropriate federal notice will not result in a filing of a federal notice.	s will not result in a loss of the federal exemp loss of an available state exemption unless su	tion. Conversely, failure to file the ich exemption is predictated on the

A. BASIC IDENTIFICATION DAT	ГА					
2. Enter the information requested for the following:	·					
• Each promoter of the issuer, if the issuer has been organized within the past five year	rs;					
Each beneficial owner having the power to vote or dispose, or direct the vote or disposit	tion of, 10% or more of a class of equity securities of the issuer,					
Each executive officer and director of corporate issuers and of corporate general and	managing partners of partnership issuers; and					
Each general and managing partner of partnership issuers.						
Check Box(es) that Apply: Promoter Beneficial Owner Executive Office	cer Director General and/or Managing Partner					
	Manual Ing . will					
Full Name (Last name first, if individual) Napler, George						
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Prince Sports Management Holdings, LLC, One Advantage Drive, Bordentown, NJ	08505					
Check Box(es) that Apply: Promoter Beneficial Owner Executive Office	cer Director General and/or Managing Partner					
Full Name (Last name first, if individual) Crosby, Christopher J.						
Business or Residence Address (Number and Street, City, State, Zip Code) Nautic Partners VI, L.P., 50 Kennedy Plaza, 12th Floor, Providence, RI 02903						
Check Box(es) that Apply: Promoter Beneficial Owner Executive Office	cer Director General and/or Managing Partner					
Full Name (Last name first, if individual) Hill, Douglas C.						
Business or Residence Address (Number and Street, City, State, Zip Code) Nautic Partners VI, L.P., 50 Kennedy Plaza, 12th Floor, Providence, RI 02903						
Check Box(es) that Apply: Promoter Beneficial Owner Executive Office	cer Director General and/or Managing Partner					
Full Name (Last name first, if individual) Evins, David						
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Prince Sports Management Holdings, LLC, One Advantage Drive, Bordentown, NJ	08505					
Check Box(es) that Apply: Promoter Beneficial Owner Executive Office	cer Director General and/or Managing Partner					
Full Name (Last name first, if individual) Nautic Partners VI, L.P.						
Business or Residence Address (Number and Street, City, State, Zip Code) 50 Kennedy Plaza, 12th Floor, Providence, RI 02903						
Check Box(es) that Apply: Promoter Beneficial Owner Executive Office	cer Director General and/or Managing Partner					
Full Name (Last name first, if individual)						
Nautic Partners VI-A, L.P.						
Business or Residence Address (Number and Street, City, State, Zip Code)	, , , , , , , , , , , , , , , , , , ,					
50 Kennedy Plaza, 12th Floor, Providence, RI 02903						
Check Box(es) that Apply: Promoter Beneficial Owner Executive Office	cer Director General and/or Managing Partner					
Full Name (Last name first, if individual)						
Boggls, Gordon						
Business or Residence Address (Number and Street, City, State, Zip Code)						
34 Fairfield Place, West Caldwell, NJ 07006						
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)						

	B. INFORMATION ABOUT OFFERING							
Yes 1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	No [2]							
Answer also in Annuality Column 2 if filing under III OF	Ø							
2. What is the minimum investment that will be accepted from any individual?								
Yes	No							
 Does the offering permit joint ownership of a single unit? Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any 								
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.	,							
Full Name (Last name first, if individual) N/A								
Business or Residence Address (Number and Street, City, State, Zip Code)								
Name of Associated Broker or Dealer								
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers								
(Check "All States" or check individual States)	l States							
AL AK AZ AR CA CO CT DE DC FL GA HI	ID							
IL IN IA KS KY LA ME MD MA MI MN MS MT NE NV NH NJ NM NY NC ND OH OK OR	MO PA							
RI SC SD TN TX UT VT VA WA WV WI WY	PR							
Full Name (Last name first, if individual)								
Business or Residence Address (Number and Street, City, State, Zip Code)								
Name of Associated Broker or Dealer								
Canada Which David Has Calidad at Land Has Calidad at Calidad at Land Has Calidad at Calida								
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	1 States							
AL AK AZ AR CA CO CT DE DC FL GA HI IL IN IA KS KY LA ME MD MA MI MN MS	MO							
MT NE NV NH NJ NM NY NC ND OH OK OR	PA							
RI SC SD TN TX UT VT VA WA WV WI WY	PR							
Full Name (Last name first, if individual)								
Business or Residence Address (Number and Street, City, State, Zip Code)								
Dushiess of Residence Address (Funder and Street, Oily, State, Zip Code)								
Name of Associated Broker or Dealer								
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers								
(Check "All States" or check individual States)								
AL AK AZ AR CA CO CT DE DC FL GA HI	ID							
IL IN IA KS KY LA ME MD MA MI MN MS	MO							
MT NE NV NH NJ NM NY NC ND OH OK OR	PA							

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	g -0-	\$ -o-
	Equity		\$ -0-
	Common Preferred		
	Convertible Securities (including warrants)		\$ <u>-0-</u>
	Partnership Interests		
	Other (Specify Class A Units		
	Total	48,421,982	\$ <u>48,421,982</u>
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number	Aggregate Dollar Amount
		Investors	of Purchases
	Accredited Investors		\$_ 48,421,982
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		s
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		S
	Total		s
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	···············	\$
	Printing and Engraving Costs		\$
	Legal Fees		- 100 000
	Accounting Fees	_	\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)	_	\$
	Other Expenses (identify)	_	S
	Total		\$ 100,000
			→

XO.	C OFFERING PRICE NUMBER	R OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C — Quarter of the issuer."	uestion 4.a. This difference is the "adjusted gross		\$
5.	Indicate below the amount of the adjusted gross proceeds of the purposes shown. If the amount for any check the box to the left of the estimate. The total of the proceeds to the issuer set forth in response to Part C	purpose is not known, furnish an estimate and ne payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	[] \$	\$
	Purchase of real estate] \$	
	Purchase, rental or leasing and installation of machi	incry	7	
	and equipment			
	Construction or leasing of plant buildings and facilit		_] \$	∏ 2
	Acquisition of other businesses (including the value offering that may be used in exchange for the assets	or securities of another	¢	r-1 c
	issuer pursuant to a merger)			
	Repayment of indebtedness		_ 2	48 321 982
	Working capital			> 2 40/07/1002
	Other (specify):			□ 2
			¬\$	п \$
	Column Totals			
	Total Payments Listed (column totals added)			3,321,982
J. /2:		d.Federal signature		
15		D FEDERAL SIGNATURE	(8) (A) (A) (A) (A) (A) (A)	
sio	issuer has duly caused this notice to be signed by the unature constitutes an undertaking by the issuer to furni information furnished by the issuer to any non-accre-	sh to the U.S. Securities and Exchange Commis	sion, upon writte	le 505, the following n request of its staff
lssı	er (Print or Type)	Signature	Date	
	nce Sports Management Holdings, LLC	Monde	September 3	2008 .
Nai	ne of Signer (Print or Type)	Title of Signer (Print or Type)		-
		President and CEO		

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Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)